Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

| PETITION  | FOR EXTENSION OF TIME UNDER :    | Docket Number (Optional | Docket Number (Optional) |                              |  |
|---|----------------------------------|-------------------------|--------------------------|------------------------------|--|
| FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)   |                                  |                         | 00-VE22.40C1             | 00-VE22.40C1                 |  |
| Application Number 10/632,803   |                                  |                         |                          | Filed November 9, 2006       |  |
| For TELEPHONE NETWORK CONTROL SYSTEM AND METHOD   |                                  |                         |                          |                              |  |
| Art Unit 2614   |                                  |                         | Examiner Rasha S.        | Examiner Rasha S. Al-Aubaidi |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                                  |                         |                          |                              |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                                  |                         |                          |                              |  |
|   |                                  | <u>Fee</u>              | Small Entity Fee         |                              |  |
|   | One month (37 CFR 1.17(a)(1))    | \$120                   | \$60                     | \$                           |  |
| V   | Two months (37 CFR 1.17(a)(2))   | \$460                   | \$230                    | s 460.00                     |  |
|   | Three months (37 CFR 1.17(a)(3)) | \$1050                  | \$525                    | s                            |  |
|   | Four months (37 CFR 1.17(a)(4))  | \$1640                  | \$820                    | s                            |  |
|   | Five months (37 CFR 1.17(a)(5))  | \$2230                  | \$1115                   | \$                           |  |
| Applicant claims small entity status. See 37 CFR 1.27.  |                                  |                         |                          |                              |  |
| A check in the amount of the fee is enclosed.   |                                  |                         |                          |                              |  |
| Payment by credit card. Form PTO-2038 is attached.  |                                  |                         |                          |                              |  |
| The Director has already been authorized to charge fees in this application to a Deposit Account.   |                                  |                         |                          |                              |  |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number  I have enclosed a duplicate copy of this sheet.                     |                                  |                         |                          |                              |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form.<br>Provide credit card information and authorization on PTO-2038.                   |                                  |                         |                          |                              |  |
| I am the applicant/inventor.  |                                  |                         |                          |                              |  |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |                                  |                         |                          |                              |  |
| attorney or agent of record. Registration Number  |                                  |                         |                          |                              |  |
| attorney or agent under 37 CFR 1.34.  |                                  |                         |                          |                              |  |
| July 10, 2008   |                                  |                         |                          |                              |  |
| Signature   |                                  |                         | D                        | Date                         |  |
| Michael J. Strauss  |                                  |                         | 202-662-0200             | 202-662-0200                 |  |
| Typed or printed name   |                                  |                         | Telephor                 | Telephone Number             |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                                  |                         |                          |                              |  |
| Total of 1 forms are submitted.   |                                  |                         |                          |                              |  |
|   |                                  |                         |                          |                              |  |

This conceitor of information is required by 3 CEP 1, 135(a). The information is required to obtain or ratios a bonefit by the public which is to file (and by the USPY 00 processes) an application. Confidentially is governed by \$5.1.SC. 122 and \$7 CEP. 1.11 and 1.4. This collections is estimated to take as immates to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the immates of complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this file on madric suggestions for reducing this further, should be sent to the Clief information Officer. U.S. Parent and Trademark Office. U.S. Department of Commence, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patheris, P.O. Dos 1450, Alexandris, VA 22313-1450.